Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 1 of 49

| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS, WESTERN DIVISION | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | | |
|----|---|--|----------------------------------|--|
| | | About Debtor 1: | Abou | it Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | We shall style the control of the same of | 보이면 중요한 사람들이 되었다. 말했다. 선생님 | performed from the second control of the sec |
| | Write the name that is on | Donald | | |
| | your government-issued picture identification (for example, your driver's | First name | First | name |
| | license or passport). | Middle name | Middle | e name |
| | Bring your picture | Jones | | |
| | with the trustee. | Jones G Last name and Suffix (Sr., Jr., II, III) | Last r | name and Suffix (Sr., Jr., II, III) |
| | | | | |
| 2. | All other names you have used in the last 8 years | | | |
| | Include your married or maiden names. | | | |
| | maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security | | | |
| | number or federal Individual Taxpayer | ххх-хх-8137 | 의 설립 등 경기 기술과 | |
| | Identification number (ITIN) | | | |
| | V · · · · · · · · | | | |
| | | | | |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 2 of 49

| Debtor 1 Jones, Donald | | Case number (if known) | | | |
|--|---|---|--|--|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
| Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) | | | |
| <i>doing business a</i> s names | EINs | EINs | | | |
| 5. Where you live | | If Debtor 2 lives at a different address: | | | |
| | 162 Dodge Ave DeKalb, IL 60115-3916 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 3 of 49

| De | btor 1 Jones, Donald | | | | | Case number (if known) | | | |
|-----|--|--------------------|--|--|---------------------------------------|--|--|--|--|
| Po. | which a Count About | V D | | | | | | | |
| 7. | Tell the Court About The chapter of the | Check o | ne. (For a | brief description of | each, see Notice Required by 11 | U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form | | | |
| | Bankruptcy Code you are choosing to file under | 2010)). / | 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | |
| | 3 | Cha | pter 7 | | | | | | |
| | | ☐ Cha | pter 11 | | | | | | |
| | | ☐ Cha _l | pter 12 | | | | | | |
| | | ☐ Cha _l | pter 13 | | | | | | |
| 8. | How you will pay the fee | ar. If | out now y | ou may pay. Typical ney is submitting you | ly, if you are paying the fee yours | with the clerk's office in your local court for more details leff, you may pay with cash, cashier's check, or money order ttorney may pay with a credit card or check with a | | | |
| | | □ Ir | need to pa | y the fee in install | ments. If you choose this option | , sign and attach the Application for Individuals to Pay The | | | |
| | | FII | ııng ⊢ee ın | installments (Officia | al Form 103A). | | | | |
| | | yo | ot required our family s | to, waive your fee, a size and you are una | and may do so only if your income | only if you are filing for Chapter 7. By law, a judge may, but is a less than 150% of the official poverty line that applies to b. If you choose this option, you must fill out the <i>Application</i> and file it with your petition. | | | |
| 9. | Have you filed for | ■ No. | **** | | | | | | |
| | bankruptcy within the last 8 years? | □ Yes. | | | | | | | |
| | , | □ 1es. | District | | \A/h.o.n | | | | |
| | | | District | | When When | Case number | | | |
| | | | District | | When | Case number Case number | | | |
| 10 | Are any bankruptcy cases | | | | | | | | |
| .0. | pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ■ No □ Yes. | | | | | | | |
| | • | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| 11. | Do you rent your residence? | ■ No. | Go to | line 12. | | | | | |
| | | ☐ Yes. | Has yo | our landlord obtained | d an eviction judgment against yo | u and do you want to stay in your residence? | | | |
| | | | | No. Go to line 12. | | | | | |
| | | | | Yes. Fill out <i>Initial</i> 8 bankruptcy petition | Statement About an Eviction Jud n. | Igment Against You (Form 101A) and file it with this | | | |
| | | | | | | | | | |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 4 of 49

| Del | otor 1 Jones, Donald | | | Case number (if known) | | |
|---|---|------------------------|---|---|--|--|
| | | | | | | |
| Par | | sinesses | You Own as a Sole Prop | rietor | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | | | |
| | | ☐ Yes. | Name and location of | business | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if a | Name of business, if any | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach it | | Number, Street, City, | State & ZIP Code | | |
| | to this petition. | | Check the appropriate | box to describe your business: | | |
| | | | ☐ Health Care B | usiness (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | ☐ Single Asset F | teal Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | ☐ Stockbroker (a | s defined in 11 U.S.C. § 101(53A)) | | |
| | | | ☐ Commodity Br | oker (as defined in 11 U.S.C. § 101(6)) | | |
| | | | ☐ None of the ab | ove | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation | s. If you indicate that you a | e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate so If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of so, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 116(1)(B). | | |
| | For a definition of small | ■ No. | I am not filing under C | hapter 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chap Code. | ter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | ☐ Yes. | I am filing under Chap | ter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Par | t 4: Report if You Own or | Have Any | / Hazardous Property or / | Any Property That Needs Immediate Attention | | |
| 14. | Do you own or have any | ■ No. | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or | ☐ Yes. | What is the hazard? | | | |
| | safety? Or do you own any property that needs immediate attention? | | If immediate attention is needed, why is it needed? | , | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the property? | Number, Street, City, State & Zip Code | | |
| | | | | | | |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 5 of 49

| Deb | otor 1 Jones, Donald | | | | Case number (if known) |
|-----|--|----------|--|--|--|
| Par | Explain Your Efforts t | o Re | ceive a Briefing About Credit Counseling | | |
| 15. | Tell the court whether you have received a briefing about credit counseling. | | out Debtor 1: I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a | | out Debtor 2 (Spouse Only in a Joint Case): u must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of |
| | The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You | | certificate of completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. | | completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. |
| | must truthfully check one of the following choices. If you cannot do so, you are not eligible to file. | | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. | | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. |
| | If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors | | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. | | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. |
| | can begin collection activities again. | " | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. | | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. |
| | | | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this | | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. |
| | | | case. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only | | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| | | | for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of: | | I am not required to receive a briefing about credit counseling because of: |
| | | | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. |
| | | | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | | ☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. |
| | | | Active duty. I am currently on active military duty in a military combat zone. | | Active duty. I am currently on active military duty in a military combat zone. |
| | | | If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. | | If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 6 of 49

| Deb | otor 1 | Jones, Donald | | | | Case numbe | !f (if known) | |
|------|--------|---|----------------------------------|---|--|---|--|--|
| Par | t 6: | Answer These Questi | ons for Repo | orting Purposes | | | | |
| 16. | | t kind of debts do have? | 16a. A | re your debts primarily co dividual primarily for a perso | onsumer debts? Co | onsumer debts are define ehold purpose." | ed in 11 U.S.C.§ 101(8) as "incurred by an | |
| | | | | □ No. Go to line 16b. | | | | |
| | | | | Yes. Go to line 17. | | | | |
| | | | 16b. A | re your debts primarily bu or a business or investment o | usiness debts? Bus or through the opera | siness debts are debts th | nat you incurred to obtain money vestment. | |
| | | | | No. Go to line 16c. | | | | |
| | | | | Yes. Go to line 17. | | | | |
| | | | 16c. S | tate the type of debts you ow | re that are not consu | umer debts or business o | lebts | |
| 17. | | you filing under oter 7? | □ No. 1 | am not filing under Chapter | 7. Go to line 18. | | | |
| | any | o you estimate that after ny exempt property is xcluded and | ■ Yes. la | I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? | | | | |
| | | inistrative expenses paid that funds will be | | l _{No} | | | | |
| | avail | available for distribution to unsecured creditors? | | l Yes | | | | |
| 18. | How | How many Creditors do you estimate that you owe? | ■ 1-49 | | ☐ 1,000-5,0 | 000 | 2 5,001-50,000 | |
| | | | □ 50-99 | | 5001-10, 0 | 000 | 5 0,001-100,000 | |
| | □ 100- | | ☐ 100-199 ☐ 200-999 | | ☐ 10,001-25 | 5,000 | ☐ More than100,000 | |
| 19. | | ow much do you | □ \$0 - \$50, | 000 | □ \$1.000.00 | 01 - \$10 million | ☐ \$500,000,001 - \$1 billion | |
| | | nate your assets to orth? | \$50,001 | | | 001 - \$50 million | □ \$1,000,000,001 - \$10 billion | |
| | 20 | | \$100,001 | | | | ☐ \$10,000,000,001 - \$50 billion | |
| | | | □ \$500,001 | - \$1 million | □ \$100,000 | ,001 - \$500 million | ☐ More than \$50 billion | |
| 20. | | much do you | □ \$0 - \$50,¢ | 000 | □ \$1.000.00 | 01 - \$10 million | ☐ \$500,000,001 - \$1 billion | |
| | estin | nate your liabilities to | □ \$50,001 | | | 001 - \$50 million | □ \$1,000,000,001 - \$10 billion | |
| | De: | | \$100,001 | - \$500,000 | □ \$50,000,0 | 001 - \$100 million | □ \$10,000,000,001 - \$50 billion | |
| | | | □ \$500,001 | - \$1 million | □ \$100,000 | ,001 - \$500 million | ☐ More than \$50 billion | |
| Part | 7: | Sign Below | | | | | | |
| For | you | | I have exami | ned this petition, and I declar | e under penalty of p | perjury that the informatio | n provided is true and correct. | |
| | | | If I have cho States Code. | sen to file under Chapter 7, I understand the relief availa | I am aware that I mable under each cha | nay proceed, if eligible, u apter, and I choose to pro | under Chapter 7, 11,12, or 13 of title 11, United oceed under Chapter 7. | |
| | | | If no attorney have obtained | represents me and I did not d and read the notice require | pay or agree to pay d by 11 U.S.C. § 34 | someone who is not an 42(b). | attorney to help me fill out this document, I | |
| | | | l request reli | request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | |
| | | | I understand case can res | making a false statement, co ult in fines up to \$250,000, o | oncealing property, or imprisonment for u | or obtaining money or pro up to 20 years, or both. 1 | operty by fraud in connection with a bankruptcy 8 U.S.C. §§ 152, 1341, 1519, and 3571. | |
| | | | Donald Jo Signature of | | Donas | Signature of Debtor | 2 | |
| | | | Executed on | August 25, 2017 | | Executed on | | |
| | | | | MM / DD / YYYY | | | / DD / YYYY | |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 7 of 49

| Debtor 1 Jones, Donald | · · | Case number (if known) |
|---|--|---|
| | | |
| For your attorney, if you are represented by one | I, the attorney for the debtor(s) named in this petition, declare that I have Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explain person is eligible. I also certify that I have delivered to the debtor(s) the | ned the relief available under each chapter for which the |
| If you are not represented by an attorney, you do not need to file this page. | which § 707(b)(4)(D) applies, certify that I have no knowledge after an ir | nquiry that the information in the schedules filed with the |
| | Signature of Attorney for Debtor | August 25, 2017 MM / DD / YYYY |
| | Brian Wright Printed name | |
| | Brian Wright & Associates, P.C. | |
| | 437 West State Street Suite 101 Sycamore, IL 60178 Number, Street, City, State & ZIP Code | |
| | Contact phone (815) 895-2074 Email address 6304330 | bw@wrightandassociateslaw.com |
| | Bar number & State | '' |

| | | Docume | ent Page 8 of 49 | | |
|------------------------|--------------------------|-------------------|--------------------------|-------|---------|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Donald Jones | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | 1 | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, WESTERN DIV | ISION | |
| Case number (if known) | | | | | 7 Check |
| , | | | | - | _ |
| | | | | | amend |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Par | t 1: Summarize Your Assets | | |
|-----|--|--------------------|----------------------|
| | | Your as | sets what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 90,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 4,145.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 94,145.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | Your lia Amount | |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 96,790.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F | \$ | 60,348.07 |
| | Your total liabilities | \$ | 157,138.07 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oschedule I | \$ | 1,992.49 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,026.30 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your or or the court with your or or the court with your or the court with your or or the court with your or the court with you | ther schedule | es. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159. | oersonal, fam | ily, or household |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this be | ox and subm | it this form to the |

court with your other schedules.

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 9 of 49

Debtor 1 Jones, Donald Page 9 of 49 Case number (if known)

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11: OR Form 122B Line 11: OR Form 122C-1 Line 14 |

| \$ | 0.00 |
|----|------|
| | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Bort 4 on Colombia E/E against a fall and an | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 10 of 49 Fill in this information to identify your case and this filing: Debtor 1 **Donald Jones** Middle Name Last Name First Name Debtor 2 Middle Name Last Name (Spouse, if filing) First Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, WESTERN DIVISION

Official Form 106A/B

Case number

Schedule A/B: Property

12/15

Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

| 1. Do you own or | have any legal or equ | uitable interest in a | ny reside | ence, building, land, or similar property? | | | |
|----------------------------|---|------------------------|---------------|--|---------------|--|--|
| ☐ No. Go to Pa | ırt 2. | | | | | | |
| Yes. Where | is the property? | | | | | | |
| 1.1 | | | What | is the property? Check all that apply | | | |
| 162 Dodo Street address | ge Ave s, if available, or other des | cription | | Single-family home Duplex or multi-unit building Condominium or cooperative | the | amount of any secure | aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property. |
| DeKalb City | IL State | 60115-3916 ZIP Code | | Manufactured or mobile home Land Investment property | • •••• | rent value of the re property? \$90,000.00 | Current value of the portion you own? \$90,000.00 |
| | | | □ □ Who | Timeshare Other has an interest in the property? Check one Debtor 1 only | (suc a lif | | rour ownership interest ancy by the entireties, or |
| County | | | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this iter erty identification number: | □ m, sucl | Check if this is con (see instructions) h as local | nmunity property |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......=>

\$90,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debtor 1 Jones, Donald 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Oldsmobile Who has an interest in the property? Check one 3 1 Make: the amount of any secured claims on Schedule D: Ciera Model: ■ Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 1995 Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another 83.000 Miles \$750.00 \$750.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Saturn Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: S-Series Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2001 Year. Debtor 2 only Current value of the Current value of the 83000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another 83,000 Miles \$1,000.00 \$1,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories □ No Yes Who has an interest in the property? Check one Make: **Ford** Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: E350 Motorhome ■ Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Year: 1999 Debtor 2 only Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another ☐ Check if this is community property \$1,500.00 \$1,500.00 (see instructions) 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$3,250,00 you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Couch, Chair, Freezer/Fridge, Bed, Bureau \$350.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... \$25.00 TV

Document Page 12 of 49 Debtor 1 Case number (if known) Jones, Donald 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$300.00 Mens Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for \$675.00 Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No ■ Yes..... Institution name: 17.1. Checking Account First National Bank \$20.00

Case 17-82022

Doc 1

Filed 08/28/17

Entered 08/28/17 15:13:29

Desc Main

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 13 of 49 Debtor 1 Case number (if known) Jones, Donald 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ioint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

■ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

| Debtor 1 | Jones, Dona | ald | Document | Page 14 of 49 Case number (if known) | |
|-----------------|--|--|---------------------------|--|--------------------------------|
| Exa | ily support mples: Past due or | | sal support, child suppo | ort, maintenance, divorce settlement, property | settlement |
| ■ No | es. Give specific info | rmation | | | |
| | unpaid loan | | | ts, sick pay, vacation pay, workers' compensat | ion, Social Security benefits; |
| | s. Give specific info | ormation | | | |
| | • | | alth savings account (H\$ | SA); credit, homeowner's, or renter's insurance | |
| ■ Ye | s. Name the insurar | nce company of each police Company name: | cy and list its value. | Beneficiary: | Surrender or refund |
| | | Country Finance | cial - Whole Life | Troy Petges - Son | value: \$200.00 |
| If you | ou are the beneficiary I. | 3 | | d rance policy, or are currently entitled to receive | property because someone has |
| Exa ■ No | mples: Accidents, e | mployment disputes, ins | | or made a demand for payment to sue | |
| 34. Othe | _ | ınliquidated claims of e | very nature, including | counterclaims of the debtor and rights to s | et off claims |
| □ Ye | es. Describe each c | laim | | | |
| ■ No | • | ou did not already list | | | |
| | | | | y entries for pages you have attached for | \$220.00 |
| Part 5: | Describe Any Busine | ess-Related Property You | Own or Have an Interest | In. List any real estate in Part 1. | |
| | ou own or have any le | gal or equitable interest in | n any business-related p | roperty? | |
| | Go to Part 6. | | | | |
| | | and Commercial Fishing-F interest in farmland, list it in | | n or Have an Interest In. | |
| | ou own or have an lo. Go to Part 7. 'es. Go to line 47. | y legal or equitable inte | erest in any farm- or c | ommercial fishing-related property? | |

Describe All Property You Own or Have an Interest in That You Did Not List Above

Part 7:

Case 17-82022 Filed 08/28/17 Entered 08/28/17 15:13:29 Page 15 of 49
Case number (if known) Document Debtor 1 Jones, Donald 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$90,000.00 56. Part 2: Total vehicles, line 5 \$3,250.00 57. Part 3: Total personal and household items, line 15 \$675.00 Part 4: Total financial assets, line 36 58. \$220.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00

\$4,145.00

Desc Main

\$4,145.00

\$94,145.00

Copy personal property total

Doc 1

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

Official Form 106A/B Schedule A/B: Property page 6

| 1707(11111(1111 1 700) 10 10 10 10 10 10 10 10 10 10 10 10 10 |
|---|
| Fill in this information to identify your case: |
| Debtor 1 Donald Jones |
| First Name Middle Name Last Name |
| Debtor 2 |
| (Spouse if, filing) First Name Middle Name Last Name |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, WESTERN DIVISION |
| Case number |
| (if known) |
| |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
|--|--------------------------------------|-----|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 162 Dodge Ave | \$90,000.00 | | \$15,000.00 | 735 ILCS 5/12-901 |
| DeKalb IL, 60115-3916 Line from Schedule A/B. 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Oldsmobile Ciera | \$750.00 | | \$0.00 | 735 ILCS 5/12-1001(c) |
| 1995 Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Oldsmobile Ciera | \$750.00 | | \$750.00 | 735 ILCS 5/12-1001(b) |
| 1995 Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Saturn S-Series | \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(c) |
| 2001 83000 Line from <i>Schedule A/B</i> : 3.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| Saturn S-Series | \$1,000.00 | | \$0.00 | 735 ILCS 5/12-1001(b) |
| 2001 83000 | | | 100% of fair market value, up to any applicable statutory limit | |
| Line from Schedule A/B: 3.2 | | | | |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 17 of 49

| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
|----|---|--------------------------------------|--------|---|------------------------------------|
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Ford E350 Motorhome | \$1,500.00 | | \$1,500.00 | 735 ILCS 5/12-1001(b) |
| | 1999 | | | 100% of fair market value, up to | |
| | 9000 Line from Schedule A/B: 4.1 | | | any applicable statutory limit | |
| | Couch, Chair, Freezer/Fridge, Bed, Bureau | \$350.00 | | \$350.00 | 735 ILCS 5/12-1001(b) |
| | Line from Schedule A/B 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | TV Line from Schedule A/B 7.1 | \$25.00 | | \$25.00 | 735 ILCS 5/12-1001(b) |
| | Zine nein estricatio / v.z. 111 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Mens Clothing Line from Schedule A/B 11.1 | \$300.00 | | \$300.00 | 735 ILCS 5/12-1001(a) |
| | Line non serieule A/L IIII | | | 100% of fair market value, up to any applicable statutory limit | |
| | First National Bank Line from Schedule A/B 17.1 | \$20.00 | | \$20.00 | 735 ILCS 5/12-1001(b) |
| | Zino nom odyroduje y v Zi 1111 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Country Financial - Whole Life Line from Schedule A/B 31.1 | \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(b) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 | | | on or after the date of adjustment.) | |
| | No | | | | |
| | Yes. Did you acquire the property covered | by the exemption within | า 1,21 | 5 days before you filed this case? | |
| | □ No | | | | |
| | ☐ Yes | | | | |

| | 02022 | Document | Page 18 | of 49 | | Tani |
|---------------------------|------------------------------|--|-------------------|---|--|-----------------------------|
| Fill in this info | ormation to identify you | ır case: | | | | |
| Debtor 1 | Donald Jones | | | | | |
| Dobtor 1 | First Name | Middle Name | Last Name | | } | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States B | Bankruptcy Court for the: | NORTHERN DISTRICT OF ILL | INOIS, WESTI | ERN DIVISION | | |
| Case number | | | | | | 90 (1.25. 25. 5. |
| (ii kilowii) | | | | | _ | if this is an ded filing |
| Official Fo | rm 106D | | | | | |
| | | Who Have Claims | Secured | l by Propert | V | 12/15 |
| | | | | | | |
| | | If two married people are filing togethe t, number the entries, and attach it to t | | | | |
| 1. Do any credito | ors have claims secured by | y your property? | | | | |
| ☐ No. Che | eck this box and submit th | is form to the court with your other so | chedules. You h | nave nothing else to rep | port on this form. | |
| Yes. Fill | in all of the information b | elow. | | | | |
| Part 1: List | All Secured Claims | | | | | |
| | | more than one secured claim, list the cred | | Column A | Column B | Column C |
| | | s a particular claim, list the other creditors cal order according to the creditor 's name | | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Bank of | f America | Describe the property that secures t | the claim: | \$96,790.00 | \$90,000.00 | \$6,790.00 |
| Creditor's N | ame | 162 Dodge Ave, DeKalb, IL | | <u> </u> | <u> </u> | |
| NC4-10 | | 60115-3916 | | | | |
| PO Box | | As of the date you file, the claim is: | Check all that | | | |
| 27420-6 | boro, NC 6012 | apply. Contingent | | | | |
| | reet, City, State & Zip Code | ☐ Unliquidated | | | | |
| , , , , , | 7, | ☐ Disputed | | | | |
| Who owes the | debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | , | An agreement you made (such as | mortgage or secu | ıred | | |
| Debtor 2 only | 1 | car loan) | | | | |
| ☐ Debtor 1 and | Debtor 2 only | ☐ Statutory lien (such as tax lien, med | chanic's lien) | | | |
| ☐ At least one of | of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this community | claim relates to a debt | Other (including a right to offset) | Mortgage | | | |
| Date debt was in | ncurred <u>2013-12</u> | Last 4 digits of account numl | ber <u>6250</u> | | | |
| | | | | | | |
| Add the dollar v | ralue of your entries in Co | lumn A on this page. Write that numbe | er here: | \$96,790 | .00 | |
| If this is the last | | ne dollar value totals from all pages. | | \$96,790 | | |
| | | | | | | |
| Part 2: List 0 | Others to Be Notified fo | r a Debt That You Already Listed | | | | |
| trying to collect | from you for a debt you o | e notified about your bankruptcy for a we to someone else, list the creditor ii t you listed in Part 1, list the additional iis nage. | n Part 1, and the | en list the collection ag | ency here. Similarly, if y | ou have more |
| | | p5 | | | | |
| | umber, Street, City, State & | Zip Code | On which | h line in Part 1 did you er | nter the creditor? 2.1 | |
| Bankaı | merica avarese Cir | | 1 -4 4 1 | igite of account | 6250 | |
| | , FL 33634-2413 | | Last 4 di | igits of account number _ | UZJU | |

| | 0430 17 02022 1 | Document | Page 1 | 9 of 49 | .20 000 | o man |
|-----------------------------------|--|---|-------------------|--|------------------------------------|---|
| Fill in this inf | ormation to identify your o | | | | | |
| Debtor 1 | Donald Jones | | | | | |
| | First Name | Middle Name | Last Name | |) | |
| Debtor 2 | First Name | Middle News | Last Name | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS, WES | TERN DIVISION | | |
| Case number | | | | | | |
| (if known) | | | | | ☐ CI | neck if this is an |
| | | | | | ar | nended filing |
| Official Ea | orm 106E/F | | | | | |
| | | lha Haya Unaasurad | Claima | | | 40/4E |
| | | /ho Have Unsecured e Part 1 for creditors with PRIORIT | | | DDIODITY -I-: | 12/15 |
| Schedule G: Ex D: Creditors Wh | ecutory Contracts and Unexp no Have Claims Secured by Pr n Page to this page. If you hav | that could result in a claim. Also li ired Leases (Official Form 106G). D operty. If more space is needed, co we no information to report in a Par | o not include a | iny creditors with partially s u need, fill it out, number th | ecured claims the entries in the b | nat are listed in Schedule poxes on the left. Attach |
| Part 1: Lis | st All of Your PRIORITY Un | secured Claims | | | | |
| 1. Do any cre | editors have priority unsecure | d claims against you? | | | | |
| No. Go | to Part 2. | | | | | |
| ☐ Yes. | | | | | | |
| Part 2: Lis | at All of Your NONPRIORIT | Y Unsecured Claims | | | | |
| 3. Do any cre | editors have nonpriority unsec | cured claims against you? | | | | |
| ☐ No. You | u have nothing to report in this pa | art. Submit this form to the court with | your other sche | dules. | | |
| Yes. | | | | | | |
| unsecured | claim, list the creditor separately | aims in the alphabetical order of th y for each claim. For each claim listed st the other creditors in Part 3.lf you h | , identify what t | pe of claim it is. Do not list cla | aims already inclu | ded in Part 1. If more |
| | | | | | | Total claim |
| 4.1 Ame | × | Last 4 digits of acc | ount number | 6463 | | \$5,973.00 |
| • | iority Creditor's Name | M/h an area tha daha | . : | 0040.04 | • | |
| | espondence 3ox 981540 | When was the deb | incurrea? | 2010-04 | | |
| | aso, TX 79998-1540 | | | | | |
| Numb | er Street City State Zlp Code | As of the date you | file, the claim | s: Check all that apply | | |
| Who i | ncurred the debt? Check one. | | | | | |
| ■ De | ebtor 1 only | ☐ Contingent | | | | |
| ☐ De | ebtor 2 only | ☐ Unliquidated | | | | |
| ☐ De | ebtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At | least one of the debtors and and | | RITY unsecure | l claim: | | |
| | eck if this claim is for a comr | <u> </u> | | | | |
| debt Is the | claim subject to offset? | Obligations arising priority cla | | ration agreement or divorce th | at you did not | |
| ■ No | - | ' ' ' | | g plans, and other similar deb | ts | |
| □ Ye | | Other. Specify | • | • • | | |
| ∟ Ye | S | Other. Specify | Revolving | account | | |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 20 of 49

Debtor 1 Jones, Donald Case number (if know) 4.2 \$582.00 Blain's Farm and Fleet Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 960061 Orlando, FL 32896-0061 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 **Blitt and Gaines** Last 4 digits of account number C103 \$9,620.00 Nonpriority Creditor's Name When was the debt incurred? 661 Glenn Ave Wheeling, IL 60090-6017 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Judgment account opened 5/18/2016 4.4 Last 4 digits of account number \$5,504.00 **Capital One** 5509 Nonpriority Creditor's Name When was the debt incurred? 2014-09 PO Box 30285 Salt Lake City, UT 84130-0285 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed \square At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 21_of 49

Debtor 1 Jones, Donald Case number (if know) 4.5 \$5,434.00 **Capital One** Last 4 digits of account number 0582 Nonpriority Creditor's Name When was the debt incurred? 2014-11 PO Box 30285 Salt Lake City, UT 84130-0285 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes 4.6 Capital One N.A. Last 4 digits of account number 1172 \$1,844.00 Nonpriority Creditor's Name When was the debt incurred? 2016-06 PO Box 6492 Carol Stream, IL 60197-6492 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Open account Other. Specify 4.7 **Chase Card Services** Last 4 digits of account number 8700 \$9,352.00 Nonpriority Creditor's Name **Attn: Correspondence Dept** When was the debt incurred? 2005-05 PO Box 15298 Wilmington, DE 19850-5298 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 22 of 49

Debtor 1 Jones, Donald Case number (if know) 4.8 \$2,850.00 Citibank/Best Buy Last 4 digits of account number 5843 Nonpriority Creditor's Name Centralized Bankruptcy/CitiCorp When was the debt incurred? 2011-04 Credit S PO Box 790040 Saint Louis, MO 63179-0040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Revolving account ☐ Yes 4.9 City of Dekalb Last 4 digits of account number \$475.07 1161 Nonpriority Creditor's Name When was the debt incurred? 7/19/15 PO Box 457 Wheeling, IL 60090-0457 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another \square Check if this claim is for a community ☐ Student loans debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.10 **Discover Financial** Last 4 digits of account number 0621 \$9,620.00 Nonpriority Creditor's Name When was the debt incurred? 2014-11 PO Box 3025 New Albany, OH 43054-3025 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Revolving account ☐ Yes

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 23 of 49

| Debioi | Jones, Donaid | | Case number (if know) | |
|--------|--|---|---|------------|
| 4.11 | First National Bank | Last 4 digits of account number | 2816 | \$7,779.00 |
| | Nonpriority Creditor's Name Attn: FNN Legal Dept 1620 Dodge St MSC CODE3290 Omaha, NE 68191 | When was the debt incurred? | 2002-02 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Unliquidated☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Revolving | account | |
| 4.12 | Kishwaukee Hospital Nonpriority Creditor's Name | Last 4 digits of account number | 6171 | \$196.00 |
| | 1 Kish Hospital Dr | When was the debt incurred? | 3/5/15 | |
| | DeKalb, IL 60115-9602 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharin | a plane, and other similar debts | |
| | Yes | Other. Specify | g plans, and other similar debts | |
| 4.13 | Synchrony Bank/Lowes Nonpriority Creditor's Name | Last 4 digits of account number | 9958 | \$1,119.00 |
| | PO Box 965064 | When was the debt incurred? | 2013-12 | |
| | Orlando, FL 32896-5064 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | , | |
| | ■ No | Debts to pension or profit-sharing | | |
| | ☐ Yes | Other. Specify Revolving | account | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 24 of 49

| Debtor 1 Jones, Donald | | Case number (f know) |
|---|--|--|
| Name and Address Amex PO Box 297871 Fort Lauderdale, FL 33329-7871 | On which entry in Part 1 or Part 2 did y Line 4.1 of (Check one): | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | 6463 |
| Name and Address Capital One Bank USA N 15000 Capital One Dr Richmond, VA 23238-1119 | On which entry in Part 1 or Part 2 did y Line 4.4 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | 5509 |
| Name and Address Capital One Bank USA N 15000 Capital One Dr Richmond, VA 23238-1119 | On which entry in Part 1 or Part 2 did y Line 4.5 of (<i>Check one</i>): | vou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims |
| Richmond, VA 23236-1119 | Last 4 digits of account number | 0582 |
| Name and Address Chase Card PO Box 15298 Wilmington, DE 19850-5298 | On which entry in Part 1 or Part 2 did y Line <u>4.7</u> of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | 8700 |
| Name and Address Citi PO Box 6241 Sioux Falls, SD 57117-6241 | On which entry in Part 1 or Part 2 did y Line 4.8 of (<i>Check one</i>): | vou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | 5843 |
| Name and Address Discover Fin Svcs LLC PO Box 15316 Wilmington, DE 19850-5316 | On which entry in Part 1 or Part 2 did y Line 4.10 of (<i>Check one</i>): | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| • | Last 4 digits of account number | 0621 |
| Name and Address Encore Receivable management, Inc. 400 N Rogers Rd Olathe, KS 66062-1212 | On which entry in Part 1 or Part 2 did y Line 4.2 of (Check one): | rou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address Fnb Omaha PO Box 3412 Omaha, NE 68103-0412 | On which entry in Part 1 or Part 2 did y Line 4.11 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | 2816 |
| Name and Address Horizon Financial Management 9980 Georgia St Crown Point, IN 46307-6520 | On which entry in Part 1 or Part 2 did y Line 4.12 of (<i>Check one</i>): | vou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | 6171 |
| Name and Address Syncb/lowes PO Box 956005 Orlando, FL 32896 | On which entry in Part 1 or Part 2 did y Line 4.13 of (<i>Check one</i>): | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| · | Last 4 digits of account number | 9958 |
| Name and Address The Bureaus Inc 1717 Central St Evanston, IL 60201-1507 | On which entry in Part 1 or Part 2 did y Line 4.6 of (<i>Check one</i>): | rou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | 1172 |

Part 4: Add the Amounts for Each Type of Unsecured Claim

Entered 08/28/17 15:13:29 Desc Main Case 17-82022 Doc 1 Filed 08/28/17 Page 25 of 49 (f know) Document

Debtor 1 Jones, Donald

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----------------------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 60,348.07 |
| | | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 60.348.07 |

| | | | III FAUE / U UI 49 | |
|---|-------------------------|-------------------|------------------------------|---|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Donald Jones | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | _ |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS, WESTERN DIVISIO | N |
| Case number (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Numbe | whom you have the r, Street, City, State and ZIP (| contract or lease | State what the contract or lease is for |
|-----|-----------|-------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | <u> </u> |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | - |
| | | | | | |

| | | Docume | nt Page 27 o | of 49 | |
|--|---|--|---|--|-----------|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Donald Jones | | | | |
| DODIOI 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, fili | ing) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, WESTER | RN DIVISION | |
| Case num | ber | | | | |
| (if known) | | | | ☐ Check if this is an | |
| | | | | amended filing | |
| Off: 0: 0 | L Corres 40CLL | | | | |
| | I Form 106H | | | | |
| Sched | lule H: Your Cod | ebtors | | 12/1 | 15 |
| 1. Do No Yes 2. With Califo No. Yes | hin the last 8 years, have you rnia, Idaho, Louisiana, Nevada, . Go to line 3. s. Did your spouse, former spou | vou are filing a joint case, do lived in a community pro New Mexico, Puerto Rico, se, or legal equivalent live w | pperty state or territory Texas, Washington, and ith you at the time? | /? (Community property states and territories include Ariz | |
| line 2 106D) Colur | again as a codebtor only if th , Schedule E/F (Official Form nn 2. | at person is a guarantor | or cosigner. Make sure | e you have listed the creditor on Schedule D (Official se Schedule D, Schedule E/F, or Schedule G to fill out | Form t |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The creditor to whom you owe the de Check all schedules that apply: | bt |
| 3.1 | | | | ☐ Schedule D, line | |
| 3.1 | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | | | | | |
| | Number Street City | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | Schedule D, line | |
| | Name | | | Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| • | Number Street | Ctata | ZIP Code | _ | |
| | L.ITV | State | ALL CORE | | |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 28 of 49

| Fill | in this information to identify your ca | se. | | | | I | | | | |
|-------------|---|-------------------------------|----------------------------|---------------|--------|-----------------|---------------------------|--------------|-------------------------------|------------|
| | btor 1 Donald Jone | | | | | | | | | |
| _ | btor 2 puse, if filing) | | | | _ | | | | | |
| Uni | ited States Bankruptcy Court for the: | NORTHERN DISTRIC | CT OF ILLINOIS, W | ESTERN | | | | | | |
| (lf kı | se number nown) | | | | | ☐ An a | | J | g postpetition o | chapter 13 |
| <u>O</u> | fficial Form 106l | | | | | MM | 1 / DD/ Y | YYY | | |
| S | chedule I: Your Inco | ome | | | | | | | | 12/15 |
| spo atta | plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O rt 1: Describe Employment Fill in your employment | spouse is not filing with | h you, do not inclu | de informa | atior | about you | ur spous er (if kno | se. If more | e space is ne wer every qu | eded, |
| | information. | | Debtor 1 | | | | | | ing spouse | |
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status Occupation | ☐ Employed ■ Not employed | | | | ☐ Employed ☐ Not employed | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | | | | | |
| | Occupation may include student o homemaker, if it applies. | Employer's address | | | | | | | | |
| | | How long employed th | nere? | | | | _ | | | |
| Pai | rt 2: Give Details About Mon | thly Income | | | | | | | | |
| | mate monthly income as of the da | te you file this form. If yo | ou have nothing to re | eport for any | y line | e, write \$0 ir | n the spa | ce. Include | e your non-filir | ng spouse |
| • | ou or your non-filing spouse have more ce, attach a separate sheet to this for | | oine the information t | or all emplo | oyers | s for that pe | rson on t | the lines be | elow. If you ne | ed more |
| | | | | | | For Debto | or 1 | | otor 2 or ng spouse | |
| 2. | List monthly gross wages, salary deductions). If not paid monthly, ca | | | 2. | \$ | | 0.00 | \$ | N/A | |
| 3. | Estimate and list monthly overting | me pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add line | e 2 + line 3. | | 4. | \$ | 0 | .00 | \$ | N/A | |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 29 of 49

| Deb | otor 1 | Jones, Donald | | Case | e number (if known) | | | |
|-----|---------------|---|-------------|-----------|---------------------|-------|----------------------------|----------------|
| | | | | | r Debtor 1 | non-f | ebtor 2 or iling spouse | |
| | Сор | y line 4 here | 4. | \$_ | 0.00 | \$ | N/A | |
| 5. | List | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 0.00 | \$ | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$- | 0.00 | \$ | N/A | - |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | N/A | - |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$ | N/A | • |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A | - |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | N/A | - |
| | 5h. | Other deductions. Specify: | 5h.+ | \$_ | 0.00 | + \$ | N/A | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$_ | 0.00 | \$ | N/A | |
| 7. | Calc | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$_ | 0.00 | \$ | N/A | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | N/A | • |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | N/A | • |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | N/A | • |
| | 8e. | Social Security | 8e. | \$ | 1,301.90 | \$ | N/A | • |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: VA Disabillity Pension or retirement income | 8f. | \$_ \$ | 690.59 | \$ | N/A | |
| | 8g. 8h. | Other menthly income Specify | 8g. 8h.+ | · - | 0.00 | + \$ | N/A N/A | - |
| | OII. | Other monthly income. Specify. | | Ψ_ | 0.00 | Τ_Ψ | IN/A | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 1,992.49 | \$ | N/A | <u>\</u> |
| 10. | Calc | culate monthly income. Add line 7 + line 9. | 10. \$ | | 1,992.49 + \$ | | N/A = \$ | 1,992.49 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. | | | | | | , |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your direction friends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not avoify: | ependen | | • | | le J. 11. +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain | | | | | | 1,992.49 |
| | | | | | | | Combin monthly | ed / income |
| 13. | Do y ■ | you expect an increase or decrease within the year after you file this form' No. | ? | | | | | , |
| | | Yes. Explain: | | | | | | |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 30 of 49

| Fill | in this information to identify your case: | | | |
|------------|---|---|--|--|
| Deb | tor 1 Donald Jones | CI | neck if this is: | |
| <u>.</u> | | | • | |
| | tor 2buse, if filing) | □ | A supplement show expenses as of the | ving postpetition chapter 13 following date: |
| | | | | |
| Unit | ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLIN WESTERN DIVISION | OIS, | MM / DD / YYYY | |
| | | | | |
| | e number nown) | | | |
| | | | | |
| \bigcirc | fficial Form 106J | | | |
| | chedule J: Your Expenses | | | 12/15 |
| Be info | as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this for known). Answer every question. | | | |
| Par | | | | |
| 1. | Is this a joint case? | | | |
| | No. Go to line 2. | | | |
| | ☐ Yes. Does Debtor 2 live in a separate household? ☐ No | | | |
| | ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses to | for Separate Householdof Deb | otor 2. | |
| 2. | Do you have dependents? ■ No | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| | Do not state the | | | □ No |
| | dependents names. | | | Yes |
| | | | | □ No |
| | | | | ☐ Yes ☐ No |
| | | | | ☐ Yes |
| | | | | □ No |
| | | | | ☐ Yes |
| 3. | Do your expenses include No | | | |
| | expenses of people other than yourself and your dependents? | | | |
| | | | | |
| exp | t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless your says as of a date after the bankruptcy is filed. If this is a supple blicable date. | | | |
| Incl | lude expenses paid for with non-cash government assistance if | you know the | | |
| valı | ue of such assistance and have included it on Schedule I: Your I ficial Form 106l.) | | Your exp | enses |
| | | | | |
| 4. | The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot. | clude first mortgage 4. | \$ | 706.30 |
| | If not included in line 4: | | | |
| | 4a. Real estate taxes | 4a. | \$ | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | 4b. | \$ | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | 4c. | · : ———— | 0.00 |
| F | 4d. Homeowner's association or condominium dues | 4d. | \$ \$ | 0.00 |
| 5. | Additional mortgage payments for your residence, such as hom | ne equity idans 5. | Φ | 0.00 |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 31 of 49

| eptor 1 | Jones, I | Donaid | Case number (if know | n) | | | |
|---------|---|--|---------------------------------|---------------------------------|--|--|--|
| l Itil | ities: | | | | | | |
| 6a. | | r, heat, natural gas | 6a. \$ | 250.00 | | | |
| 6b. | • | ewer, garbage collection | 6b. \$ | 50.00 | | | |
| 6c. | • | e, cell phone, Internet, satellite, and cable services | 6c. \$ | 250.00 | | | |
| 6d. | • | • | 6d. \$ | 0.00 | | | |
| | | ekeeping supplies | 7. \$ | 350.00 | | | |
| | | children's education costs | 8. \$ | | | | |
| | | | | 0.00 | | | |
| | • | lry, and dry cleaning | 9. \$ | 50.00 | | | |
| | • | products and services | 10. \$ | 50.00 | | | |
| | | ental expenses | 11. \$ | 0.00 | | | |
| | | . Include gas, maintenance, bus or train fare. | 12. \$ | 200.00 | | | |
| | | car payments. | 13. \$ | | | | |
| | | clubs, recreation, newspapers, magazines, and books | · | 0.00 | | | |
| | | tributions and religious donations | 14. \$ | 0.00 | | | |
| | urance. | nourones deducted from your pay or included in lines 4 or 20 | | | | | |
| | i. Life insura | nsurance deducted from your pay or included in lines 4 or 20. | 15a. \$ | 65.00 | | | |
| | . Health ins | | 15b. \$ | 0.00 | | | |
| | . Vehicle in | | 15c. \$ | | | | |
| | | | · — | 55.00 | | | |
| | | urance. Specify: | 15d. \$ | 0.00 | | | |
| | (es. Do not ir ecify: | nclude taxes deducted from your pay or included in lines 4 or 20. | 16. \$ | 0.00 | | | |
| | · | ease payments: | | 0.00 | | | |
| 17a | . Car paym | ents for Vehicle 1 | 17a. \$ | 0.00 | | | |
| 17b | . Car paym | ents for Vehicle 2 | 17b. \$ | 0.00 | | | |
| 17c | . Other. Sp | ecify: | 17c. \$ | 0.00 | | | |
| | I. Other. Sp | | 17d. \$ | 0.00 | | | |
| | | of alimony, maintenance, and support that you did not repo | | 0.00 | | | |
| | | your pay on line 5, Schedule I, Your Income (Official Form 10 | | | | | |
| | er payment ecify: | s you make to support others who do not live with you. | \$ 19. | 0.00 | | | |
| | | erty expenses not included in lines 4 or 5 of this form or on | | | | | |
| | | s on other property | 20a. \$ | 0.00 | | | |
| | . Real estat | | 20b. \$ | 0.00 | | | |
| | | homeowner's, or renter's insurance | 20c. \$ | 0.00 | | | |
| | | | | | | | |
| | | nce, repair, and upkeep expenses | 20d. \$ | 0.00 | | | |
| | | ner's association or condominium dues | 20e. \$ | 0.00 | | | |
| . Oth | er: Specify: | | 21. +\$ | 0.00 | | | |
| . Cal | culate your | monthly expenses | | | | | |
| 22a | a. Add lines 4 | through 21. | \$ | 2,026.30 | | | |
| 22b | . Copy line 2 | 22 (monthly expenses for Debtor 2), if any, from Official Form 106 | 6J-2 \$ | | | | |
| 22c | . Add line 22 | a and 22b. The result is your monthly expenses. | \$ | 2,026.30 | | | |
| } Cal | culate vour | monthly net income. | | <u> </u> | | | |
| | - | 12 (your combined monthly income) from Schedule I. | 23a. \$ | 1,992.49 | | | |
| | | r monthly expenses from line 22c above. | 23b\$ | | | | |
| 230 | . Copy you | i monuny expenses nomine 220 above. | Δ3Dφ | 2,026.30 | | | |
| 23c | | your monthly expenses from your monthly income. | | 00.04 | | | |
| | The resul | t is your monthly net income. | 23c. \$ | -33.81 | | | |
| . Do | vou expect | an increase or decrease in your expenses within the year aft | er you file this form? | | | | |
| , po | Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a | | | | | | |
| For | example, do y | | ct your mongage payment to it | norcase or accrease because of | | | |
| For | example, do y | e terms of your mortgage? | ect your mortgage payment to it | norease or decrease because o | | | |
| For | example, do y dification to the | | ect your mortgage payment to i | increase of decrease because of | | | |

| Fill in this infor | mation to identify your | case: | | | |
|-------------------------------|-----------------------------|-------------------------|----------------------------|--------------------------|--|
| Debtor 1 | Donald Jones | | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTR | RICT OF ILLINOIS, WESTE | ERN DIVISION | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |
| Official Forr | m 106Dec | | | | |
| | | an Individu | al Debtor's S | Schedules | 12/15 |
| years, or both. 1 | 8 U.S.C. 99 152, 1341, 19 | 519, and 3571. | , , | | , or imprisonment for up to 20 |
| Sigi | n Below | | | | |
| Did you pa | y or agree to pay some | one who is NOT an att | orney to help you fill out | bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. N | Name of person | | -4 | | kruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| Under penal that they afte | ity of perjury, I declare t | that I have read the su | mmary and schedules file | ed with this declaration | and |
| x //ø | nold J | mes | XSignature | of Debtor 2 | |
| | re of Debtor 1 | | 2.3 | | |
| Date | August 25, 2017 | | Date | | |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 33 of 49

| Fill | in this inforn | nation to identify your | case: | | | |
|-------------|----------------------------|--|---|---|--|---|
| De | btor 1 | Donald Jones | | | | |
| l Da | htor O | First Name | Middle Name | Last Name | | |
| | btor 2 ouse if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ited States Ba | nkruptcy Court for the: | NORTHERN DISTRIC | T OF ILLINOIS, WESTI | ERN DIVISION | |
| • | se number _ | | | | | Chapte if this is an |
| <u> </u> | | | | | | ☐ Check if this is an amended filing |
| Ωf | ficial Fo | rm 107 | | | | |
| | | | Affairs for Indiv | iduals Filing 1 | for Bankruptcy | 4/1 |
| Be a | s complete a | nd accurate as possible | e. If two married people | are filing together, bot | h are equally responsible | · |
| Par | t 1: Give D | etails About Your Mar | ital Status and Where Yo | u Lived Before | | |
| 1. | What is your | current marital status | ? | | | |
| | ☐ Married | | | | | |
| | Not mar | ried | | | | |
| 2. | During the (a | st 3 years, have you li | ved anywhere other than | where you live now? | | |
| | ■ No | | | | | |
| | ☐ Yes. List | all of the places you live | d in the last 3 years. Do no | t include where you live | now. | |
| | Debtor 1 Pri | or Address: | Dates Debtor there | 1 lived Debtor 2 P | rior Address: | Dates Debtor 2 lived there |
| 3. state | Within the lass | st 8 years, did you eve s include Arizona, Califo | r live with a spouse or le ornia, Idaho, Louisiana, Ne | gal equivalent in a cor evada, New Mexico, Pu | mmunity property state or e erto Rico, Texas, Washingto | territory? (Community property on and Wisconsin.) |
| | ■ No | | | | | · |
| | _ | ke sure you fill out <i>Sched</i> | lule H: Your Codebtors (O | ficial Form 106H). | | |
| Part | 2 Explain | the Sources of Your I | ncome | | | |
| | riii iii trie totai | amount of income you | loyment or from operating received from all jobs and we income that you receive | all businesses, includin | his year or the two previoug part-time activities. | ıs calendar years? |
| | ■ No | | | | | |
| | ☐ Yes. Fill i | in the details. | | | | |
| | | 9 | Debtor 1 | | Debtor 2 | |
| | | • | Sources of income Check all that apply. | Gross income (before deductions exclusions) | Sources of incom | |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 34 of 49

| Det | otor 1 | _ <u>Jc</u> | nes, Dor | nald | | | | Ca | se number (if knowr | ı) <u> </u> | |
|------|---------------------------|----------------|-------------------------------|--|--|--------------------------------------|---|--|--|--|---|
| 5. | Did y | ou r | eceive any | other incom | ne during this y | /ear or the tw∈ | o previous calen | dar years? | | | |
| | Includ other | de ind publ | come regard ic benefit pa | dless of wheth syments; pens | ner that income i sions; rental inco | is taxable. Exar ome; interest; d | mples of other inc | ome are alir | m lawsuits: rovaltie | rt; Social Se es; and gamb | curity, unemployment, an ling and lottery winnings. |
| | List ea | ach s | source and | the gross inc | ome from each s | source separat | ely. Do not include | e income tha | t you listed in line | 4. | |
| | | No | | | | | | | | | |
| | • | Yes. | Fill in the d | etails. | | | | | | | |
| | | | | | Debtor 1 Sources of i Describe bek | | Gross incomeach source (before deduce exclusions) |) | Debtor 2 Sources of in Describe belo | | Gross income (before deductions and exclusions) |
| | | | dar year be December | | SS/VA Dis | ability | \$ 2 | 23,899.00 | | | |
| | | | dar year: December | 31, 2014) | SS/VA Disa | ability | \$2 | 23,899.00 | | EEL SEEL LE | |
| Part | 3: | List | Certain Pa | ayments You | ı Made Before | You Filed for | Bankruptcy | | | | |
| | | ither No. | | | 's debts prima | | | sumar dahta | are defined in 11 | U.C.C. \$ 404 | (8) as "incurred by an |
| | | | individual | primarily for a | personal, family | , or household | purpose." | sumer debis | are defined in 11 | 0.5.6. 9 101 | (8) as incurred by an |
| | | | During the | 90 days befo | ore you filed for b | oankruptcy, did | d you pay any cred | litor a total of | \$6,425* or more? | > | |
| | | | □ No. | Go to line | | | | | | | |
| | | | ☐ Yes | List below creditor. D | each creditor to o not include na | whom you paid | d a total of \$6,425 | * or more in | one or more paym | ents and the | total amount you paid tha |
| | | | +0.1 | payments t | io an attorney foi | r this bankrupto | cy case. | | | | iny. Also, do not include |
| | _ | | | | | | after that for case | es filed on or | after the date of a | djustment. | |
| | Y | es. | Debtor 1 of During the | or Debtor 2 o 90 days befo | or both have prore you filed for b | imarily consu pankruptcy, did | ımer debts. I you pay any cred | itor a total of | \$600 or more? | | |
| | | | □ No. | Go to line | 7. | | | | | | |
| | | | ■ Yes | List below on payments for this bankru | or domestic sup | whom you paid port obligations | d a total of \$600 or s, such as child s | more and the more and a | ne total amount yo limony. Also, do n | u paid that cr ot include pa | editor. Do not include yments to an attorney for |
| | Credi | itor's | s Name and | d Address | Da | ates of payme | ent Total | amount paid | Amount you still owe | Was this | payment for |
| | Bank | k of | America | Mortgage | | /4/16 | \$2 | ,118.90 | \$0.00 | ■ Mortg | age |
| | | | | | | /4/16 /4/16 | | | | ☐ Car | • |
| | | | | | 5 / | -1 /10 | | | | ☐ Credit | - - |
| | | | | | | | | | | | Repayment |
| | | | | | | | | | | Other_ | ers or vendors — |
| · • | Within | 1 1 V | ear before | vou filed for | bankruptev di | id vou make : | a payment on a d | leht vou ou | ed anyone who | was an insid | ler? |
| . 1 | <i>nsider.</i> which y | ຮ inc you a | lude your re are an office | elatives; any g er, director, pe | jeneral partners; erson in control, | relatives of an or owner of 20° | ly general partners % or more of their | ; partnershi _i voting secu | os of which you ar rities: and any ma | e a general p naging agent | er: artner; corporations of , including one for a upport and alimony. |
| 1 | ■ N | _ | iet all nove | ents to an ins | ider | | | | | | |
| | | | Name and | | | ates of payme | ant Total | amount | Amountur | Decer 4 | au thia marus sut |
| | | | tuille allu / | | Da | жез от рауте | ant iotai | paid | Amount you still owe | neason t | or this payment |
| ١. | Nithin | 1 | ar hafara | vou filed for | hankruntau di | id van maka a | | ******* | | | tabani at en e |

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 35 of 49

| Debtor 1 Jones, Donald | | | Case number (if known) | | | | | |
|------------------------|--|--|----------------------------------|---------------------|--------------------|----------------|--|--|
| | insider? Include payments on debts guaranteed or cos | signed by an insider. | | | | | | |
| | ■ No | | | | | | | |
| | Yes. List all payments to an insider | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount | Amount you | Reason for thi | e navment | | |
| | | | paid | still owe | Include creditor | | | |
| Pa | art 4: Identify Legal Actions, Repossession | ons, and Foreclosures | | | | | | |
| 9. | Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. | | | | | | | |
| | □ No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the c | ase | | |
| | DISCOVER BANK vs. DONALD L | Judgment | DE KALB LAW | | ☐ Pending | | | |
| | JONES 16SC103 | | MAGISTRATE | | ☐ On appeal | | | |
| | 1650103 | | 661 Glenn Ave Wheeling, IL 60 | 000 6017 | ☐ Concluded | | | |
| | | | wifeeling, it ou | 090-0017 | Unsatisfied - | £0,600,00 | | |
| | | | | | Olisalistica - | \$9,620.00 | | |
| 10. | Within 1 year before you filed for bankrup: Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. | tcy, was any of your prop w. | erty repossessed, for | eclosed, garnish | ed, attached, seiz | ed, or levied? | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the | | |
| | | | | | | property | | |
| | | Explain what happene | | | | | | |
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment bed No | ptcy, did any creditor, inc ause you owed a debt? | luding a bank or finan | cial institution, s | et off any amoui | nts from your | | |
| | ☐ Yes. Fill in the details. | | | | | | | |
| | Creditor Name and Address | Describe the action the | e creditor took | Date a taken | ection was | Amount | | |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a | cy, was any of your propenother official? | erty in the possession | of an assignee f | or the benefit of | creditors, a | | |
| | No | | | | | | | |
| | ☐ Yes | | | | | | | |
| Pa | rt 5: List Certain Gifts and Contributions | | | | | | | |
| | | Ann alla | | | | | | |
| ٦. | Within 2 years before you filed for bankrup No | ncy, did you give any gins | s with a total value of | more than \$600 | per person? | | | |
| | Yes. Fill in the details for each gift. | | | | | | | |
| | Gifts with a total value of more than \$600 person | per Describe the gifts | | Dates the gif | you gave ts | Value | | |
| | Person to Whom You Gave the Gift and Address: | | | · | | | | |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 36 of 49

| De | Jones, Donald | | Case number | er (if known) | | | | | | |
|-----|---|------------------|--|--|----------------------|--|--|--|--|--|
| 14. | Within 2 years before you filed for ban ■ No □ Yes. Fill in the details for each gift or | | did you give any gifts or contributions with a tot | al value of more than \$ | 6600 to any charity? | | | | | |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP C | total | Describe what you contributed | Dates you contributed | Value | | | | | |
| Pa | rt 6: List Certain Losses | | | | | | | | | |
| 15. | Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? | | | | | | | | | |
| | ■ No ☐ Yes. Fill in the details. | | | | | | | | | |
| | Describe the property you lost and how the loss occurred | Desci | ribe any insurance coverage for the loss | Date of your | Value of property | | | | | |
| | now the loss occurred | Includ insura | le the amount that insurance has paid. List pending the claims on line 33 of Schedule A/B: Property. | loss | los | | | | | |
| Pai | t 7: List Certain Payments or Transfe | rs | | | | | | | | |
| | □ No ■ Yes. Fill in the details. Person Who Was Paid Address Email or website address | oreparers | or credit counseling agencies for services required in Description and value of any property transferred | Date payment or transfer was | Amount of payment | | | | | |
| ` | Person Who Made the Payment, if Not | You | | made | | | | | | |
| | Brian Wright & Associates, P.C. 437 West State Street Suite 101 Sycamore, IL 60178 | | Attorney's Fees and Filing Fees | 5/3/16 - 400.00 5/23/16 - 200.00 8/1/16 - 480.00 8/10/16 - 335.00 | \$1,050.00 | | | | | |
| | Access Counseling, Inc. | | Pre Credit Counseling | 4/21/17 | \$14.95 | | | | | |
| | website | | | | | | | | | |
| | Within 1 year before you filed for bankri promised to help you deal with your cre Do not include any payment or transfer that No Yes. Fill in the details. | ditors o | d you or anyone else acting on your behalf pay o to make payments to your creditors? d on line 16. | r transfer any property | y to anyone who | | | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | | | |
| | transferred in the ordinary course of you | ur busind | lid you sell, trade, or otherwise transfer any propess or financial affairs? | | | | | | | |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 37 of 49

| | ebtor 1 Jones, Donald | | Case nu | ımber (if known) | | |
|-----|---|--|----------------------------|---|---|--|
| | | | | | | |
| | gifts and transfers that you have already listed o | on this statement. | | | | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Received Transfer Address | Description and value property transferred | pay | cribe any property or ments received or debts | Date transfer was made | |
| | Person's relationship to you | | paid | I in exchange | | |
| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details. | otcy, did you transfer any pro etection devices.) | perty to a self-settle | ed trust or similar device o | of which you are a | |
| | Name of trust | Description and value | of the property tran | referred | Date Transfer was | |
| | | | or the property trus | ioioiica | made | |
| Pa | nt 8: List of Certain Financial Accounts, Inc | struments, Safe Deposit Boxe | s, and Storage Unit | s | | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | | e of account or trument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfe | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | |
| | No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to Address (Number, Street, C and ZIP Code) | | e the contents | Do you still have it? | |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | |
| | ■ No | | | | | |
| | ☐ Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had act to it? Address (Number, Street, Cand ZIP Code) | | the contents | Do you still have it? | |
| Par | rt 9: Identify Property You Hold or Control | for Someone Else | | | | |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | |
| | ■ No | | | | | |
| | ☐ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State an Code) | | the property | Value | |
| Par | t 10: Give Details About Environmental Info | rmation | | | | |
| For | the purpose of Part 10, the following definitio | ns apply: | | | | |
| - | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations | | | | | |

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

controlling the cleanup of these substances, wastes, or material.

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 38 of 49

| De | btor 1 | Jones, Donald | | Case number (if known) | | |
|-----|--|--|---|--|--|--|
| | | | | | | |
| | own, | operate, or utilize it, including disp | osal sites. | | | |
| | <i>Haza</i> mate | rdous material means anything an original right right right. | environmental law defines as a hazardous lar term. | s waste, hazardous substance, toxic | substance, hazardou | |
| Rep | oort all | notices, releases, and proceedings | that you know about, regardless of when | they occurred. | | |
| 24. | Has a | any governmental unit notified you | that you may be liable or potentially liable | e under or in violation of an environn | nental law? | |
| | | No | • | | | |
| | | Yes. Fill in the details. | | | | |
| | | e of site ress (Number, Street, City, State and ZIP Cod | Governmental unit Address (Number, Street, City, State a ZIP Code) | Environmental law, if you know it | Date of notice | |
| 25. | Have | you notified any governmental unit | t of any release of hazardous material? | | | |
| | = 1 | No | | | | |
| | □ ' | Yes. Fill in the details. | | | | |
| | | e of site ress (Number, Street, City, State and ZIP Cod | Governmental unit Address (Number, Street, City, State a ZIP Code) | Environmental law, if you know it | Date of notice | |
| 26. | Have | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | |
| | | No | | | | |
| | | Yes. Fill in the details. | | | | |
| | | e Title e Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | |
| Par | t 11: | Give Details About Your Business | or Connections to Any Business | | | |
| | | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? | | | | |
| | | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | |
| | | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | |
| | _ | ☐ A partner in a partnership | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | |
| | No. None of the above applies. Go to Part 12. | | | | | |
| | ☐ Yes. Check all that apply above and fill in the details below for each business. | | | | | |
| | | ness Name | | | or | |
| | Address | | | Employer Identification numb Do not include Social Security | ot include Social Security number or ITIN. | |
| | | | Name of accountant or bookkeeper | Dates business existed | | |
| 28. | Within institu | n 2 years before you filed for bankru ntions, creditors, or other parties. | uptcy, did you give a financial statement t | o anyone about your business? Incl | ude all financial | |
| | ■ N | lo | | | | |
| | □ Y | es. Fill in the details below. | | | | |
| | Name Addre | | Date Issued | | | |
| Dox | 10. | Sign Polow | | | | |

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 39 of 49

| Debtor 1 Jones, Donald | | Case number (if known) |
|---|--|---|
| bankruptcy case can result in fir 18 U.S.CI §§ 152, 1341, 1519, and | 13571. | o 20 years, or both. |
| Donald Jones Signature of Debtor 1 | | or 2 |
| Date August 25, 2017 | Date | · |
| pankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 8 U.S.Ci §§ 152, 1341, 1519, and 8571. Donald Jones Signature of Debtor 2 Signature of Debtor 1 Date August 25, 2017 Date August 25, 2017 Date No Yes Poid you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes No | | |
| | neone who is not an attorney to help you fill | out bankruptcy forms? |
| Yes. Name of Person . A | Attach the Bankruptcy Petition Preparer's Notice | Declaration and Signature (Official Form 119) |

Case 17-82022 Doc 1 Filed 08/28/17 Entered 08/28/17 15:13:29 Desc Main Document Page 40 of 49

United States Bankruptcy Court Northern District of Illinois, Western Division

| IN RE: | | Case No. |
|------------------------------|--|--|
| Jones, Donald | | Chapter 7 |
| | Debtor(s) | The proof of the p |
| | VERIFICATION OF CR | EDITOR MATRIX |
| | | Number of Creditors24 |
| The above-named Debtor(s) | hereby verifies that the list of credito | ors is true and correct to the best of my (our) knowledge. |
| Date: <u>August 25, 2017</u> | | Gones |
| | Joint Debtor | |

Amex Correspondence PO Box 981540 El Paso, TX 79998-1540

Amex PO Box 297871 Fort Lauderdale, FL 33329-7871

Bank of America NC4-105-03-14 PO Box 26012 Greensboro, NC 27420-6012

Bankamerica 4909 Savarese Cir Tampa, FL 33634-2413

Blain's Farm and Fleet PO Box 960061 Orlando, FL 32896-0061

Blitt and Gaines 661 Glenn Ave Wheeling, IL 60090-6017

Capital One PO Box 30285 Salt Lake City, UT 84130-0285 Capital One Bank USA N 15000 Capital One Dr Richmond, VA 23238-1119

Capital One N.A. PO Box 6492 Carol Stream, IL 60197-6492

Chase Card PO Box 15298 Wilmington, DE 19850-5298

Chase Card Services
Attn: Correspondence Dept
PO Box 15298
Wilmington, DE 19850-5298

Citi PO Box 6241 Sioux Falls, SD 57117-6241

Citibank/Best Buy Centralized Bankruptcy/CitiCorp Credit S PO Box 790040 Saint Louis, MO 63179-0040

City of Dekalb PO Box 457 Wheeling, IL 60090-0457 Discover Fin Svcs LLC PO Box 15316 Wilmington, DE 19850-5316

Discover Financial PO Box 3025 New Albany, OH 43054-3025

Encore Receivable management, Inc. 400 N Rogers Rd Olathe, KS 66062-1212

First National Bank Attn: FNN Legal Dept 1620 Dodge St MSC CODE3290 Omaha, NE 68191

Fnb Omaha PO Box 3412 Omaha, NE 68103-0412

Horizon Financial Management 9980 Georgia St Crown Point, IN 46307-6520

Kishwaukee Hospital 1 Kish Hospital Dr DeKalb, IL 60115-9602 Syncb/lowes PO Box 956005 Orlando, FL 32896

Synchrony Bank/Lowes PO Box 965064 Orlando, FL 32896-5064

The Bureaus Inc 1717 Central St Evanston, IL 60201-1507

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 17-82022 Doc 1 Filed 08/28/17

Document Page 49 of 49

Entered 08/28/17 15:13:29
Page 49 of 49

Desc Main

B201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Illinois, Western Division

| IN RE: | Case No. | | |
|--|---|--|--|
| Jones, Donald | Chapter 7 | | |
| Debtor(s) | , A | | |
| | TICE TO CONSUMER DEBTOR(S) F THE BANKRUPTCY CODE | | |
| Certificate of [Non-Attor | rney] Bankruptcy Petition Preparer | | |
| I, the [non-attorney] bankruptcy petition preparer signing the notice, as required by § 342(b) of the Bankruptcy Code. | debtor's petition, hereby certify that I delivered to the debt | or the attached | |
| Printed Name and title, if any, of Bankruptcy Petition Prepare Address: | petition preparer is not an inc the Social Security number o | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, | |
| X | principal, responsible person the bankruptcy petition prepa (Required by 11 U.S.C. § 11 | arer.) | |
| Signature of Bankruptcy Petition Preparer of officer, principa partner whose Social Security number is provided above. | l, responsible person, or | | |
| Certific | cate of the Debtor | | |
| I (We), the debtor(s), affirm that I (we) have received and reactions are the second s | d the attached notice, as required by § 342(b) of the Bankru | ıptcy Code. | |
| Jones, Donald | _ x Nonall & Jones | 8/25/2017 | |
| Printed Name(s) of Debtor(s) | Signature of Debtor | Date | |
| Case No. (if known) | X | | |
| | Signature of Joint Debtor (if any) | Date | |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

© 2017 CINgroup 1.866.218.1003 - CINcompass (www.cincompass.com)